

**Portuguese American
Suncoast Association, Inc.**

7808 46th Avenue North
St. Petersburg, FL 33709
727-546-0476
pasastpete@aol.com



Membership Application

(one application per person)

Name: _____ Date: _____

Address: _____ Apt: _____

City: _____ State: ___ Zip: _____ Phone: (____) _____

E-mail: _____ Date of Birth: _____

Dependent Children: Name _____ Date of Birth: _____

Name _____ Date of Birth: _____

Name _____ Date of Birth: _____

Please Select Appropriate Boxes

Sex: Male Female **Marital Status:** Single Married Other _____

Birth Place: Portugal United States Other _____

Nationality: United States Portuguese Other _____

Spouse's Nationality: United States Portuguese Other _____

Which Committees would you be willing to serve on?

Entertainment / Social Affairs Cook / Kitchen Help Public Relations

Decorating / Set Up Baking / Desserts Serving

Reservations for Social Events Bartender Clean Up

Dues Must Accompany Application

(After July 1st, dues are 60% of the regular annual dues)

Dues for Current Year: \$ _____ Received By: _____ **Date:** _____
(\$40 /year - \$24 for 6months or less)

Form of Payment: Cash Check Check #: _____

**In efforts to provide a smoke-free environment, this is a non-smoking building.
Your cooperation is greatly appreciated. THANK YOU FOR NOT SMOKING.**

Signature of Applicant: _____ **Date:** _____

Signature of President: _____ **Date of Acceptance:** _____